PTO/SB/22 (12-04)
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PETITION POWEXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 0230-0162P			
Application	00/000,7 77 00111.1		1 100	.,,		
For T CE	ELL IMMUNOACTIVITY ENHANCERS CO	ONTAINING EXTR	ACT OF LENTINUS E	DODES MYCELIUM		
Art Unit	1655		Examiner	C. R. Tate		
This is a red dentified ap	quest under the provisions of 37 CFR 1.13 optication.	36(a) to extend the	period for filing a reply	in the above		
The request	ted extension and fee are as follows (che	ck time period desi	red and enter the appro	opriate fee below):		
		<u>Fee</u>	Small Entity Fee	1		
	One month (37 CFR 1.17(a)(1))	\$120	\$60			
X	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00		
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
Anni	icant claims small entity status. See 37 C	CFR 1 27				
H	eck in the amount of the fee is enclosed.					
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	ment by credit card. Form PTO-2038 is a		emplication to a Dancait	Aggaint		
=	Director has already been authorized to c	_				
	Director is hereby authorized to charge and osit Account Number 02-2448		be required, or credit a osed a duplicate copy o			
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I am the						
r ann une			050 0 74			
	assignee of record of the entire Statement under 37 CFR 3					
	attorney or agent of record. R	Registration Number	r	_		
	x attorney or agent under 37 CF	R 1.34				
	Registration number if acting ur		40,069	<u> </u>		
	mar_		DEC 2 1	2005		
Signature  MaryAnne Armstrong, Ph.D.			Date			
			(703) 205-8000			
	Typed or printed name		Telephone	!		
	natures of all the inventors or assignees of record of the ognature is required, see below.	entire interest or their repr				
			12/22/2005 JADDO1			
To	otal of 1 forms are submit	tted.	01 FC:1252	450.1		

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DEC 2.1 2005 E					_ Apr	proved for use through	th 7/31/2006. C	OMB 0651-0032
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Effective to the Consolid	ve on 12/08/2004.				Col	mplete if Knov	vn	
Fees pursuant to the Consolid	ated Appropriatio	ns Act, 2005 (H.R	. 4818). 🛮 🗗	Application Num	nber	09/856,71 <u>7</u> -C	onf. #3321	
FEE TRA	ANSMI	TTAL	F	iling Date		February 19,	2002	
	FY 2005		F	irst Named Inv	entor	Kenji ASANO		
For	F1 2003	<u> </u>	E	xaminer Name		C. R. Tate		
Applicant claims sma	ıll entity status. S	See 37 CFR 1.27	F	Art Unit		1655		
TOTAL AMOUNT OF PA	YMENT	(\$) 450.00		Attorney Docket	No.	0230-0162P		
METHOD OF PAYME	NT (check all the	nat apply)						
X Check Credit	Card M	Ioney Order	None	Other (	please ide	ntify):		
Deposit Account Dep	nosit Account Numb	ı er 02-2448 <sub>De</sub>	eposit Accour	nt Name:	Birch, S	tewart, Kolasc	n & Birch, L	LP
For the above-ider					ed to: (ch	eck all that apply	1	
	s) indicated bel		100101 10 11	_		ndicated below,		e filina fee
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	additional fee(s r 37 CFR 1. <u>16 a</u>		nent of	x Credit	any over	payments		
FEE CALCULATION								
1. BASIC FILING, SEARC	•						_	
		G FEES Small Entity	SEAF	RCH FEES Small Entity	EXAM	INATION FEES Small Entity	5	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$		Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (inclu	<del>-</del>						50	25
Each independent claim o		g Reissues)					200	100
Multiple dependent claim	S						360	180
Total Claims Extra	a Claims F	<u>ee (\$)</u>	Fee Pa	id (\$)	!	<u>Multiple Depend</u>		_
<del></del>	x _	= _			Ī	ee (\$)	Fee Paid (\$	1
Indep. Claims Extra	a Claims F	ee (\$)	Fee Pa	id (\$)		<del></del>		_
-=	x	= =						
3. APPLICATION SIZE FE								
If the specification and d	rawings excee	d 100 sheets o	f paper (e	xcluding electr	onically	filed sequence o	r computer	•
listings under 37 CFF sheets or fraction then	(1.52(e)), the a	application siz	e tee due :	is \$250 (\$125 i 7 CEP 1 16(c)	or small	entity) for each	additional 50	)
				iltional 50 or frac	rtion than	eof Fee (\$)	Fee I	Paid (\$)
	Extra Sheets			ound up to a who			- 1001	~14 (V)
4. OTHER FEE(S)				Sund up to a Will	, o nambe		Fees	Paid (\$)
Non-English Specifica	tion, \$130 fee	e (no small ent	ity discou	nt)				
Other (e.g., late filing					econd m	nonth	45	60.00

SUBMITTED BY					
Signature	mar	Registration No. (Attorney/Agent)	40,069	Telephone	(703) 205-8000
Name (Print/Type)	MaryAnne Armstrong	, Ph.D.		Date DEC	<b>2</b> 1 2005

Birch, Stewart, Kolasch & Birch, LLP

MAA:bmp